

## **THE MPRI MODEL**

# **Policy Statements and Recommendations**

January 2006

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### **The Michigan Prisoner ReEntry Initiative Model**

The **VISION** of the Michigan Prisoner ReEntry Initiative is that every prisoner released from prison will have the tools needed to succeed in the community.

The **MISSION** of the Michigan Prisoner ReEntry Initiative is to reduce crime by implementing a seamless plan of services and supervision developed with each offender—delivered through state and local collaboration—from the time of their entry to prison through their transition, reintegration, and aftercare in the community.

The **GOALS** of the Michigan Prisoner ReEntry Initiative are to:

- **Promote public safety** by reducing the threat of harm to persons and their property by released offenders in the communities to which those offenders return.
- **Increase success rates of offenders** who transition from prison by fostering effective risk management and treatment programming, offender accountability, and community and victim participation.

The **PRINCIPLES** which guide the conceptual design and implementation strategies of the Michigan Prisoner ReEntry Initiative include:

- **Inclusion:** We reach out to everyone in our society to be represented and involved in the important decisions that affect their lives.
- **Integrity:** It's about honesty and so much more. It means, "We say what we will do," and "We do what we say."
- **Excellence:** We are not just about getting it done, but getting the work done in a way that we are proud of and that our citizens are impressed with.
- **Teamwork:** We focus on what we can do together, sharing information, resources and energy to achieve our vision of Michigan.
- **Focus on Strength:** We reach out to individuals in their development of personal strengths so that they may thrive as productive members of society.

## ***Building Safer Neighborhoods & Better Citizens: A Comprehensive Approach***

Michigan is a leader in prisoner re-entry and is the first state in the nation to converge the three major schools of thought on prisoner re-entry to develop and fully implement a comprehensive model of prisoner transition planning. The MPRI Model:

- Begins with the three-phase re-entry approach of the Department of Justice's Serious and Violent Offender ReEntry Initiative (SVORI).
- Further delineates the transition process by adding the seven decision points of the National Institute of Corrections' Transition from Prison to Community Initiative (TPCI) model.
- Incorporated into its approach the policy statements and recommendations from the Report of the ReEntry Policy Council that is coordinated by the Council of State Governments.

In this way, the MPRI represents a synergistic model for prisoner re-entry that is deeply influenced by the nation's best thinkers on how to improve former prisoners' success.

To develop the MPRI Model, Michigan had the tremendous benefit of technical assistance grants from the National Governors Association (NGA) and the National Institute of Corrections (NIC) that provide substantial resources for consultation, research, training, and technical assistance. As a result of the grant from NGA, the MPRI is also utilizing zip-code level parolee mapping of Michigan conducted by the Urban Institute as part of our intensive strategic-planning process. As a result, the knowledge base created by the MPRI is unprecedented.

Michigan is poised for success combining a strong mandate from the Governor, a powerful policy framework, and strong community buy in. The challenge now is statewide implementation on a scale of 10,000 prisoners per year transitioning successfully from prison.

## ***The Three-Phase, Seven-Decision-Point MPRI Model***

The MPRI Model involves improved decision making at seven critical decision points in the three phases of the custody, release, and community supervision/discharge process.

### ***PHASE ONE—GETTING READY***

The **institutional phase** describes the details of events and responsibilities which occur during the offender's imprisonment from admission until the point of the parole decision and involves the first two major decision points:

- 1. Assessment and classification:*** Measuring the offender's risks, needs, and strengths.
- 2. Prisoner programming:*** Assignments to reduce risk, address need, and build on strengths.

### ***PHASE TWO—GOING HOME***

The **transition to the community or re-entry phase** begins approximately six months before the offender's target release date. In this phase, highly specific re-entry plans are organized that address housing, employment, and services to address addiction and mental illness. Phase Two involves the next two major decision points:

- 3. Prisoner release preparation:*** Developing a strong, public-safety-conscious parole plan.
- 4. Release decision making:*** Improving parole release guidelines.

### ***PHASE THREE—STAYING HOME***

The **community and discharge phase** begins when the prisoner is released from prison and continues until discharge from community parole supervision. In this phase, it is the responsibility of the former prisoner, human services providers, and the offender's network of community supports and mentors to assure continued success. Phase Three involves the final three major decision points of the transition process:

- 5. Supervision and services:*** Providing flexible and firm supervision and services.
- 6. Revocation decision making:*** Using graduated sanctions to respond to behavior.
- 7. Discharge and aftercare:*** Determining community responsibility to "take over" the case.

## *Case Management and Transition Accountability Plans*

The lynchpin of the MPRI Model is the development and use of Transition Accountability Plans (TAPs) at four critical points in the offender transition process that succinctly describe for the offender, staff, and community exactly what is expected for offender success. The TAPs, which consist of summaries of the offender's Case Management Plan at critical junctures in the transition process, are prepared with each prisoner at prison intake, at the point of the parole decision, when the offender returns to the community, and when the offender is to be discharged from parole supervision. TAPs are concise guides for the prisoners and staff:

- **TAP1:** The expectations for the prison term that will help prisoners prepare for release.
- **TAP2:** The terms and conditions of offender release to communities.
- **TAP3:** The supervision and services offenders will experience in the community.
- **TAP4:** The elements of the Case Management Plan for eventual discharge from parole.

**The Transition Accountability Plan (TAP)** integrates offenders' transition from prisons to communities by spanning phases in the transition process and agency boundaries. TAP is a collaborative product involving prison staff, the offender, the releasing authority, community supervision officers, human services providers (public and/or private), victims, and neighborhood and community organizations. TAP describes actions that must occur to prepare individual offenders for release from prison, defines terms and conditions of their release to communities, specifies the supervision and services they will experience in the community, and describes their eventual discharge to aftercare upon successful completion of supervision. The objective of the TAP is to increase both overall community protection by lowering risk to persons and property and by increasing individual offender's prospects for successful return to and self-sufficiency in the community.

The TAP process begins soon after offenders enter prison and continues during their terms of confinement, through their release from prison, and continues after their discharge from supervision as an evolving framework for aftercare provided by human service agencies or other means of self-help and support. **At each step along this continuum TAP is administered by a Transition Team, whose members include prison staff, parole supervision staff, and community agencies and service providers.** The membership of the Transition Management Team and their respective roles and responsibilities will change over time. During the institutional phase prison staff may lead the team. During the reentry and community supervision phase parole officers may lead the team. During the reintegration phase human services agencies or community services providers may lead the team. After offenders have successfully completed community supervision, their TAP may continue and be managed by staff of human services agencies, if the former offender chooses to continue to seek and receive services or support. At each stage in the process Team members will use a case management model to monitor progress in implementing the plan.

TAP reduces uncertainty in terms of release dates and actions (and timing of actions) that need to be taken by prisoners, prison staff, the releasing authority, community supervision staff, and partnering agencies. Increased certainty will motivate prisoners to participate in the

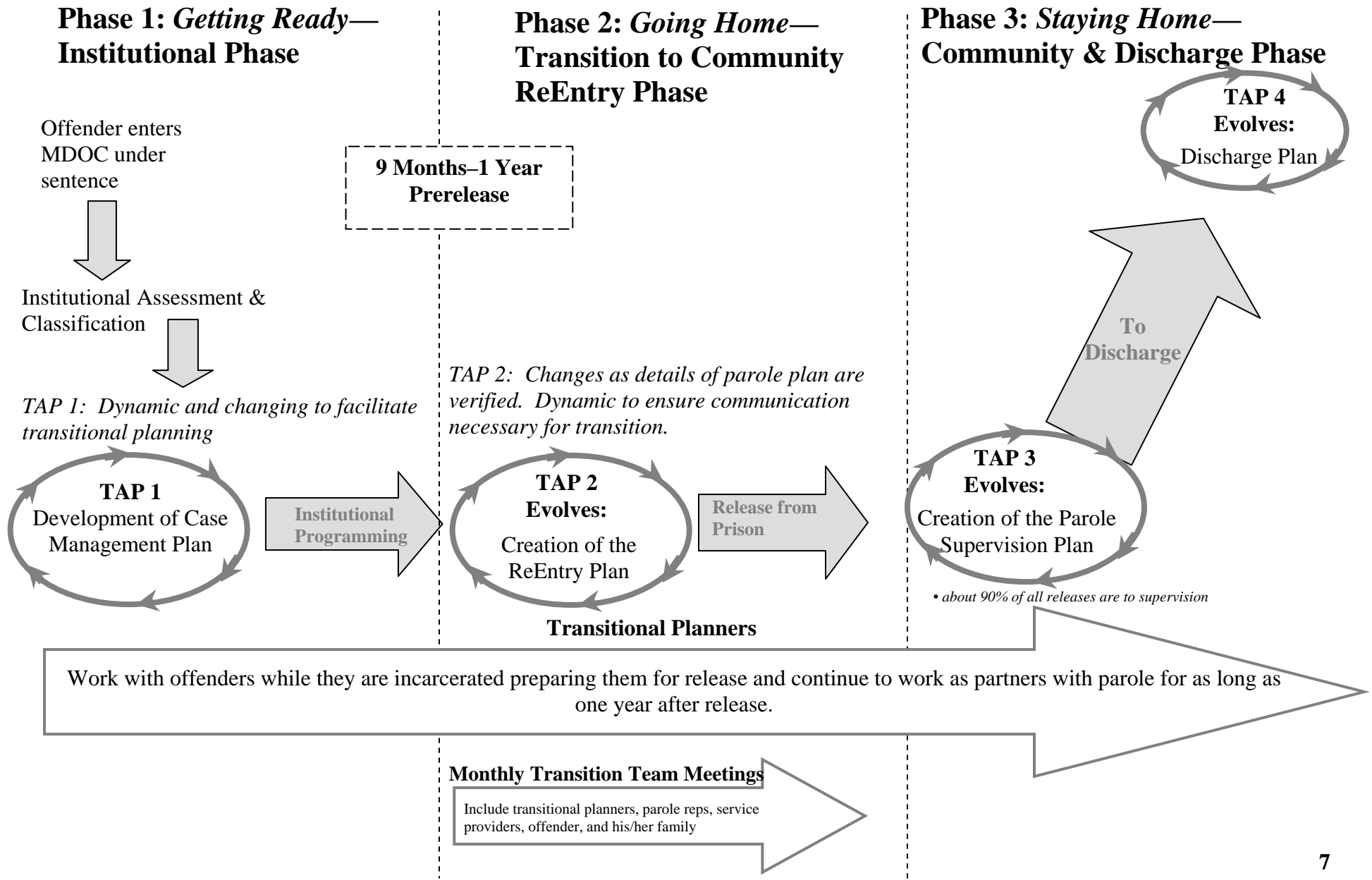
TAP process and to become engaged in fulfilling their responsibilities and will ensure that all parties are held accountable for timely performance of their respective responsibilities.

**The TAP process is built on the following principles:**

1. The TAP process starts during an offender's classification soon after their admission to prison and continues through their ultimate discharge from community supervision.
2. TAPs define programs or interventions to modify individual offender's dynamic risk factors that were identified in a systematic assessment process.
3. TAPs are sensitive to the requirements of public safety, and to the rational timing and availability of services. In an ideal system, every prisoner would have access to programs and services to modify dynamic risk factors. In a system constrained by finite resources, officials need to rationally allocate access to services and resources, using risk management strategies as the basis for that allocation.
4. Appropriate partners should participate in the planning and implementation of individual offender's TAPs. These include the offender, prison staff, releasing authorities, supervision authorities, victims, offenders' families and significant others, human service agencies, and volunteer and faith-based organizations.
5. Individual TAPs delineate the responsibilities of offenders, correctional agencies and system partners in the creation, modification, and effective application of the plans, and hold them accountable for performance of those responsibilities.
6. TAPs provide a long-term road map to achieve continuity in the delivery of treatments and services, and in the sharing of requisite information, both over time and across and between agencies.
7. A case management process is used to arrange, advocate, coordinate, and monitor the delivery of a package of services needed to meet the specific offender's needs. During the prison portion of TAP, prison staff functions as case managers. As offenders prepare for release and adjust to community supervision, their parole officer will become the case manager. When they are successfully discharged from supervision, a staff member from a human service agency may assume case management responsibilities for former offenders who choose to seek services or support.

# Transition Accountability Plan

## MPRI Process Flowchart







## **SUMMARY** **THE MPRI MODEL**

### ***POLICY STATEMENTS AND WORKGROUP RECOMMENDATIONS*** **(AS APPROVED BY THE MPRI STATE POLICY TEAM 8-25-05)**

*The National ReEntry Policy Council ([www.reentrypolicy.org](http://www.reentrypolicy.org)) developed a guide for states and other jurisdictions interested in pursuing improvements for prisoner re-entry. The 2003 ReEntry Policy Council Report includes a series of policy statements and recommendations to guide the re-entry planning and development process and to improve prisoner re-entry services. The Report has been used extensively in Michigan, alongside the Transition from Prison to Community Initiative (TPCI) Model, and the Serious and Violent Offender ReEntry Initiative (SVORI) Model, to develop our approach. Specifically, the ReEntry Policy Council Report was adapted to create two types of documents to assist Michigan's efforts in designing and implementing the Michigan Prisoner ReEntry Initiative (MPRI) Model: First, a set of guidelines on design and implementation issues and, secondly, a set of workbooks - one for each of the three MPRI Model phases (Getting Ready, Going Home, Staying Home) - that have been used to determine the policy statements, recommendations and implementation strategies for the MPRI Model.*

*This document provides a summary of the MPRI Model, a series of 22 Policy Statements and 150 recommendations that the State Policy Team has approved for implementation. The 22 Policy Statements are categorized by the Three MPRI Phases and delineated by the 7 primary decision points that comprise the Model. The 150 recommendations on how to implement the Policy Statements are found in the back of the document, under Endnotes. Not surprisingly, the Workgroups recommendations closely track those of the Policy Council. References to the ReEntry Policy Council Report are included. Our thanks to the ReEntry Policy Council for their excellent advice and assistance.*

**Getting Ready: The Institutional Phase**  
**Going Home: The Transition to the Community – ReEntry Phase**  
**Staying Home: The Community and Parole Discharge Phase**

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## Phase I: Getting Ready; The Institutional Phase

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### ***DECISION POINT #1: ASSESSMENT AND CLASSIFICATION***

#### **Policy Statement 8: Development of Intake Procedure**

**Establish a comprehensive, standardized, objective, and validated intake procedure that, upon the admission of the prisoner to the corrections facility, can be used to assess the individual's strengths, risks, and needs.** (*Reference: Report of the ReEntry Policy Council, Pgs. 110-140*)

#### **Recommendations:**

- A.** Review intake procedures to determine the range and validity of screening and assessment practices.
- B.** Ensure that the screening and assessment process is appropriately prioritized, and that the overall intake procedure is streamlined and efficient.
- C.** Employ a risk-assessment instrument for classification and integrate other available public safety information.
- D.** Screen all offenders for psychological and mental health issues, physical health problems, or substance abuse and dependency, in order to identify prisoners who require further assessment.
- E.** Ensure that the unattended dependents, if any, of each individual admitted to the facility are placed with a caretaker.
- F.** Assess long-term and dynamic risks associated with each individual admitted to prison.
- G.** Conduct comprehensive assessments for each individual whose screening identifies psychological and mental health issues, physical health problems, and substance abuse and dependency.
- H.** Assess interpersonal skills and basic literacy.
- I.** Determine the vocational aptitudes, education levels, and employment histories of all sentenced individuals.
- J.** Review the individual's current benefits and entitlements and determine what steps will be needed to transition the individual back to those programs upon release.
- K.** Assess all assets and debts and work with prisoners to prevent the build-up of child support arrears upon their admission to a correctional facility.
- L.** Chart the prisoner's family life, including such factors as domestic violence, the impact of incarceration on relationships, and the involvement of children.
- M.** Encourage the use of only validated screening and assessment instruments in the intake procedure.
- N.** Encourage the use of instruments that can be modified for use beyond the initial assessment.

- O. Ensure that intake staff are properly trained to administer screening and assessment instruments.
- P. Engage community-based service providers to inform assessments and to administer screening and assessment instruments.
- Q. Address issues of cultural competency through staff training and the engagement of community-based providers.
- R. Assess the special needs of female offenders.
- S. Develop protocols to ensure the accuracy and availability of information while adhering to laws and regulations that govern the confidentiality of this data.
- T. Explain to prisoners the purpose and function of the screening and assessment process and the extent to which the information will be shared.

## ***DECISION POINT #2: PRISONER BEHAVIOR AND PROGRAMMING***

### **Policy Statement 9: Development of Programming Plan**

**Develop, for each person incarcerated, an individualized plan that, based upon information obtained from assessments, explains what programming should be provided during the period of incarceration to ensure that his or her return to the community is safe and successful.** (*Reference: Report of the ReEntry Policy Council, Pgs. 141-153*)

#### **Recommendations:**

- A. Charge new or existing positions with the responsibility of reviewing information obtained through assessments and of developing a plan that provides for the coordinated delivery of targeted services for each person admitted.
- B. Consider the primary needs, strengths and background of the individual in developing the programming plan.
- C. Ensure that all program planning incorporates the principles of cultural and gender competency.
- D. Provide opportunities for crime victims, victim advocates, family members, and community members to inform the prisoner's programming plan.
- E. Engage community-based providers in the development of a programming plan.
- F. Include in the programming plan provisions for periodic reassessments to be conducted during the prisoner's incarceration and for changes to be made in the plan accordingly.
- G. Establish and maintain a centralized record-keeping system as well as a system for regular communication among program planners and other prison-based staff and service providers.

## **Policy Statement 10: Physical Health Care**

**Facilitate community-based health care providers' access to prisons and promote delivery of services consistent with community standards and the need to maintain public health.** *(Reference: Report of the ReEntry Policy Council, Pgs. 156-166)*

### **Recommendations:**

- A. Engage community-based organizations to provide health care services for prisoner populations prior to discharge.
- B. Use telemedicine to deliver effective and cost-efficient health services.
- C. Integrate prevention, education, and good health promotion into correctional health care services and partner with community-based organizations to supplement this information.
- D. Maintain medical records so that they provide up-to-date information regarding a prisoner's condition and treatment, and ensure that a summary of the records follows the person as he or she transfers between providers.
- E. Promote comprehensive, integrated medical, mental health and substance abuse treatment services, both within correctional facilities and as a central component of corrections-community linkages.
- F. Ensure that even short-term prisoners receive basic medical care and transition planning services.

## **Policy Statement 11: Mental Health Care**

**Facilitate community-based mental health care providers' access to prisons and promote delivery of services consistent with community standards and the need to maintain public mental health.** *(Reference: Report of the ReEntry Policy Council, Pgs. 167-178)*

### **Recommendations:**

- A. Engage the community-based mental health care system in providing pre- and post-release services to prisoners with mental health needs.
- B. Ensure that prison formularies provide access to the most appropriate medications.
- C. Provide appropriate psychosocial supports and services.
- D. Employ telecommunications technology to deliver effective and cost-effective services.
- E. Establish protocols to address co-occurring substance abuse and mental health disorders.

## **Policy Statement 12: Substance Abuse Treatment**

**Provide effective substance abuse treatment to anyone in prison who is chemically dependent.** (*Reference: Report of the ReEntry Policy Council, Pgs. 179-178*)

### **Recommendations:**

- A.** Determine the extent to which existing services are effective and sufficient to meet the demand for substance abuse treatment.
- B.** Assess candidates for program participation carefully, and prioritize treatment for drug-dependent prisoners and those approaching release.
- C.** Implement evidence-based treatment services that make the best use of available resources.
- D.** Engage the community-based substance abuse system to provide effective, culturally competent services to people in correctional facilities who are in need of treatment.

## **Policy Statement 13: Children and Families**

**Make available services and supports for family members and children of prisoners, and, when appropriate, help to establish, re-establish, expand, and strengthen relationships between prisoners and their families.** (*Reference: Report of the ReEntry Policy Council, Pgs. 190-200*)

### **Recommendations:**

- A.** Provide parenting and other programs to address a range of family needs and responsibilities of people in prison.
- B.** Facilitate contact between prisoners and their children and other family members during the period of incarceration, when appropriate.
- C.** Increase collaboration between departments of corrections and child-support agencies to promote information about and access to the child-support process by incarcerated parents and their families.

## **Policy Statement 14: Behaviors and Attitudes**

**Provide cognitive behavioral therapy, peer support, mentoring, and basic living skills programs that improve offenders' behaviors, attitudes, motivation, and ability to live independently, succeed in the community, and maintain a crime-free life.** (*Reference: Report of the ReEntry Policy Council, pgs. 201-210*)

### **Recommendations:**

- A. Provide prisoners with programs that include evidence-based cognitive-behavioral treatments.
- B. Facilitate efforts of community and faith-based institutions, peer support groups, and other service providers to engage and mentor prisoners, and to foster relationships that improve trust and confidence in treatment and services.
- C. Provide prisoners with services that address their need for basic life skills, including relationship skills.
- D. Compel unwilling and high-risk prisoners to participate in behavioral and other related treatment services, and ensure that services for those who appear unresponsive to programs continue when those individuals return to the community.
- E. Provide (and encourage prisoners to attend) victim impact panels, impact of crime classes, and other educational programs involving victims and/or victim advocates designed to convey the harm resulting from crime.

## **Policy Statement 15: Education and Vocational Training**

**Teach prisoners functional, educational, and vocational competencies based on employment market demand and public safety requirements.** (*Reference: Report of the ReEntry Policy Council, pgs. 211-220*)

### **Recommendations:**

- A. Develop programs that will enable prisoners to be functionally literate and capable of receiving high school or postsecondary credentials.
- B. Analyze the job market in the area to which people in prison will be returning.
- C. Ensure that vocational and education classes target the needs of the job market.
- D. Encourage prisoners to participate in educational and job training programs.
- E. Engage community-based agencies, such as volunteer and faith-based organizations, to provide institutional job-skills programs.
- F. When appropriate, provide prisoners with opportunities to gain occupational competence through postsecondary education.
- G. Prioritize the allocation of education and training resources when resources are limited.

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## Phase Two: Going Home; The ReEntry Planning Phase

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### ***DECISION POINT #3: PRISONER RELEASE PREPARATION***

#### **Policy Statement 16: Work Experience**

**Provide prisoners with opportunities to participate in work assignments and skill-building programs that build toward successful careers in the community.** (Reference: Report of the ReEntry Policy Council, pgs. 221-226)

##### **Recommendations:**

- A. Provide work assignments in prison that correspond to the needs of the employment market.
- B. Develop pre-apprenticeship work assignments which provide a clear path into community-based apprenticeship programs in high demand occupations.
- C. Establish work programs that involve nonprofit, volunteer, and community service organizations so that participants can gain work experience without competing with other potential employees in the community.

#### **Policy Statement 19: Housing**

**Facilitate a person's access to stable housing upon his or her re-entry into the community.** (Reference: Report of the ReEntry Policy Council, Pgs. 256-281)

##### **Recommendations:**

- A. Ensure that transition planners, working with community-based organizations, are familiar with the full range of housing options available in each community and maintain lists or inventories of available housing.
- B. Determine on an individualized basis the particular housing needs for each person released from prison.
- C. Evaluate the feasibility, safety, and appropriateness of an individual living with family members after his or her release from prison.
- D. Ensure that family violence risks are recognized and addressed in the housing plan of any person whose return to the community may pose a risk to the individual or to his or her family or partner.

- E. Identify the appropriate housing option for each incarcerated individual well in advance of release.
- F. Educate prisoners about strategies for finding and maintaining housing in the community, and teach them about their legal rights as tenants in the private rental market.
- G. Provide individuals who are entering the private rental market—and who demonstrate that they are without adequate resources to pay rent—with small stipends and/or housing assistance for the period immediately after release.
- H. Develop “re-entry housing,” to meet the specific and unique needs of people released from prison.
- I. Encourage private sector or nonprofit housing developers or community-based organizations to develop housing accessible to people leaving prison.
- J. Consider individuals leaving prison who have histories of homelessness as part of the homeless priority population, to facilitate their access to supportive housing made available under the McKinney-Vento Act.

## **Policy Statement 20: Planning Continuity of Care**

**Prepare community-based health and treatment providers, prior to the release of an individual, to receive that person and to ensure that he or she receives uninterrupted services and supports upon his or her return community.** *(Reference: Report of the ReEntry Policy Council, pgs. 282-292)*

### **Recommendations:**

- A. Prepare a summary health record containing information about important medical problems, prior diagnostic studies, allergies, and medications for each person released from prison prior to his or her release. **PENDING**
- B. Connect prisoners to treatment and health care providers in the community prior to their release to prevent gaps in treatment and services.
- C. Provide prisoners receiving medications with a sufficient interim supply of essential medications upon their discharge into the community.
- D. Educate people in prison about continuity of care and provide them with the summary health record and other important medical records prior to discharge.

## **Policy Statement 21: Creation of Employment Opportunities**

**Promote, where appropriate, the employment of people released from prison, and facilitate the creation of job opportunities for this population that will benefit communities.** *(Reference: Report of the ReEntry Policy Council, pgs. 293-305)*

### **Recommendations:**



- A. Educate employers about financial incentives, such as the Federal Bonding Program, Work Opportunity Tax Credit, Welfare-to-Work programs, and first-source agreements, which make a person who was released from prison a more appealing prospective employee.
- B. Determine which industries and employers are willing to hire people with criminal records and encourage job development and placement in those sectors.
- C. Review employment laws that affect the employment of people based on criminal history, and eliminate those provisions that are not directly linked to improving public safety.
- D. Promote individualized decisions about hiring instead of blanket bans and provide documented means for people with convictions to demonstrate rehabilitation.
- E. Use community corrections officers and third-party intermediaries to assist employers with the supervision and management of people released from prison.
- F. Identify community service opportunities and internships for people released from prison who cannot find work so that they can acquire real work experience and on-the-job training.

## **Policy Statement 22: Workforce development and the transition plan**

**Connect prisoners to employment, including supportive employment and employment services, before their release the community.**

*(Reference: Report of the ReEntry Policy Council, pgs. 306-316)*

### **Recommendations:**

- A. Initiate job searches before people in prison are released using community-based workforce development resources.
- B. Encourage employers to visit the correctional facility to meet with prospective employees before release.
- C. Engage community members and community-based services to act as intermediaries between employers and job-seeking individuals.
- D. Provide individuals, upon their release from prison, with written information about their prospective employers or community employment service providers and official documentation of their skills and experience, including widely accepted credentials and/or letters of recommendation.

## **Policy Statement 23: Victims, Families, and Communities**

**Prepare family members, victims, and relevant community members for the released individual's return to the community, and provide them with protection, counseling, services and support, as needed and appropriate.** *(Reference: Report of the ReEntry Policy Council, pgs. 317-330)*

**Recommendations:**

- A. Provide notification and appropriate information to victims concerning the prisoner's release and re-entry process.
- B. Offer counseling and support to crime victims preparing for the return of an individual to the community.
- C. Ensure that family members receive adequate notification and information regarding the prisoner's impending release.
- D. Consider the needs and strengths of the individual's family and then build community networks to provide counseling, safety planning, and other services to help the family cope with the emotional, financial, and interpersonal issues surrounding the individual's return.
- E. Create policies for child-support debt management and collection that encourage payment and family stability, and engage family members in creating a viable support strategy.
- F. Ensure timely and appropriate notification of key representatives of the community.

**Policy Statement 24: Identification and Benefits**

**Ensure that individuals exit prison with appropriate forms of identification and that those eligible for public benefits receive those benefits immediately upon their release.** (*Reference: Report of the ReEntry Policy Council, Pgs. 331-342*)

**Recommendations:**

- A. Ensure interagency collaboration to effectively screen prisoners for eligibility for TANF, Medicaid, supplemental security income, food stamps, and other benefits, and to facilitate successful pre-release application for these benefits.
- B. Assess individuals in prison for eligibility for veterans' benefits and services, and ensure access to those benefits for eligible individuals.
- C. Help prisoners identify and apply for appropriate benefits and identification as part of their transition plan.
- D. Ensure that documents issued by departments of corrections are accepted as valid identification by other agencies.
- E. Improve collaboration among agencies serving individuals reentering the community.
- F. Ensure timely access to Medicaid after release for eligible individuals by suspending, instead of terminating, Medicaid benefits during incarceration.
- G. Facilitate access to "nonrecurrent" TANF benefits by individuals with criminal records who are re-entering the community.
- H. Adopt a narrow definition of "in violation of a condition of parole" for the purposes of TANF, food stamps, SSI & public housing.
- I. Adopt balanced admission and eviction policies for public housing that consider individual circumstances.
- J. Ensure continued Medicaid coverage for TANF families with parents who are released from prison.

## ***DECISION POINT #4: RELEASE DECISION MAKING***

### **Policy Statement 17: Advising the Releasing Authority**

**Inform the releasing authority about the extent to which the prisoner is prepared to return to the community (and the community is prepared to receive the individual).** *(Reference: Report of the ReEntry Policy Council, pgs. 230-242)*

#### **Recommendations:**

- A.** Convene a transition planning team to review the prisoner's progress in the implementation of the programming plan and collect other information to advise the releasing authority and initiate the transition planning process.
- B.** Use a validated risk-assessment instrument and a comprehensive analysis of a person's criminal history and behavior in the institution to predict the risk he or she would present to the community if and when released.
- C.** Consider information related to the individual's strengths and service needs insofar as these issues affect public safety and/ or the establishment of terms and conditions of release.
- D.** Notify victims when the releasing authority is considering release of an offender and invite victims to provide input into the release decision and the terms and conditions of release.
- E.** Gauge the willingness and capacity of family members to receive the person upon his or her release and ensure that they receive an opportunity to provide input into the terms of release.
- F.** Capitalize on the familiarity of local leaders, including law enforcement, with the needs of their community to develop conditions of release that will enable the releasee to make meaningful contributions to the community.
- G.** Gauge willingness and capacity of community-based service providers to receive the person upon his or her release from prison.
- H.** Present to the releasing authority a clear and concise analysis of all information deemed important to determining whether the prisoner presents a risk to community safety.

### **Policy Statement 18: Release Decision**

**Ensure that people exiting prison who it is determined pose a threat to public safety are released to some form of community supervision; use the results generated by a validated risk-assessment instrument, in addition to other information, to inform the level and duration of supervision, and, for those states that have maintained some discretion in the release process, to determine when release would be most appropriate.** *(Reference: Report of the ReEntry Policy Council, pgs. 243-253)*

#### **Recommendations:**

- A.** Train releasing authorities to use and analyze the information provided to them objectively and effectively.

- B.** Ensure that, where risk assessment, criminal history information, and other factors reflect a likelihood of the person re-offending, the person is assigned to a period of community supervision after his or her release from prison.
- C.** Ensure that proposed conditions of release are supported by research, recognize the particular strengths and needs of each individual and the resources of the community, and are consistent with the rules that the releasing authority is prepared to enforce.
- D.** Determine how various payments (*e.g.*, restitution, child support, fines) expected from the prisoner upon his or her release will be incorporated into the conditions of release.
- E.** Articulate in writing the reasons for the decision by the releasing authority whenever such decision is discretionary.
- F.** Ensure that a procedure exists to modify and revise, as appropriate, the conditions of release, including the possibility for early discharge from the authority of the court or supervising administrative agency.

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## Phase Three: Staying Home; The Community & Parole Discharge Phase

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### ***DECISION POINT #5: SUPERVISION & SERVICES***

#### **Policy Statement 25: Design of Supervision Strategy**

**Review and prioritize what the releasing authority has established as terms and conditions of release and develop a supervision strategy that corresponds to the resources available to the supervising agency, reflects the likelihood of recidivism, and employs incentives to encourage compliance with the conditions of release. (Reference: Report of the ReEntry Policy Council, pgs. 343-355)**

#### **Recommendations:**

- A.** Engage community members, including representatives from community corrections, law enforcement, and community-based organizations, to serve on a transition team with corrections staff, and charge the team with the development of a comprehensive supervision strategy.
- B.** Apply the information from risk- and needs-assessment instruments administered prior to the release decision, and re-assess prisoners if necessary to determine appropriate supervision strategies.
- C.** Assign a supervision officer to each individual well before the date of his or her release and engage the officer on the transition planning team.
- D.** Seek information from, and promote cooperation with, law enforcement in the jurisdiction to which an individual will return before his or her release.
- E.** Transfer state prison prisoners as the release date approaches (and as appropriate and feasible) to correctional facilities nearest to the community to which the individual will return.
- F.** Provide each individual before release with a written copy of his or her terms and conditions of release and transition plan and explain them clearly, ensuring that he or she understands them.

## **Policy Statement 26: Implementation of Supervision Strategy**

**Concentrate community supervision resources on the period immediately following the person's release from prison, and adjust supervision strategies as the needs of the person released, the victim, the community, and the family change.** (*Reference: Report of the ReEntry Policy Council, pgs. 358-369*)

### **Recommendations:**

- A.** Focus supervision resources on the period directly following release.
- B.** Ensure contact between the supervision officer and former prisoner corresponds to level of risk presented.
- C.** Supervise parolees in the community where they live.
- D.** Coordinate the activities of local law enforcement and parole agencies.
- E.** Leverage community-based networks to assist with the implementation of the supervision strategy, and consult family and community members regularly to determine their assessment of the person's adjustment to the home and/or neighborhood.
- F.** Assess periodically the extent to which the individual's transition into the community is proceeding successfully and modify the supervision plan accordingly.
- G.** Facilitate compliance by recognizing that people under supervision will require an adjustment period, and address the issues that this period poses.

## **Policy Statement 27: Maintaining Continuity of Care**

**Facilitate releasees' sustained engagement in treatment, mental health and supportive health services, and stable housing.** (*Reference: Report of the ReEntry Policy Council, pgs. 370-382*)

### **Recommendations:**

- A.** Train community corrections officers to understand—and respond effectively to—the special needs of individuals with mental illness on parole.
- B.** Ensure that all community supervision officers know how to monitor people with substance abuse issues and how to engage parolees in treatment, where appropriate.
- C.** Coordinate physical health services for individuals with special health needs.
- D.** Implement policies and programs that prevent people leaving prison from entering emergency shelters or otherwise becoming homeless.
- E.** Foster stability in housing for individuals released to the community.

## **Policy Statement 28: Job Development and Supportive Employment**

**Recognize and address the obstacles that make it difficult for an ex-offender to obtain and retain viable employment while under community supervision.** (*Reference: Report of the ReEntry Policy Council, pgs. 383-389*)

### **Recommendations:**

- A.** Update community corrections policy so that it encourages, rather than discourages, employing people on parole.
- B.** Assist, to the extent appropriate, people with criminal records seeking to surmount legal and logistical obstacles to employment.
- C.** Promote supportive transitional employment programs through community corrections.

## ***DECISION POINT #6: REVOCATION DECISION MAKING***

## **Policy Statement 29: Graduated Responses**

**Ensure that community corrections officers have a range of options available to them to reinforce positive behavior and to address, swiftly and certainly, failures to comply with conditions of release.** (*Reference: Report of the ReEntry Policy Council, Pgs. 390-405*)

### **Recommendations:**

- A.** Establish an organized structure to guide the imposition of sanctions.
- B.** Consider revocation and re-incarceration as the most serious of many different options available for addressing violations.
- C.** Assess individuals who violate conditions of release to gauge the level of response needed.
- D.** Respond to technical violations of conditions of release by restructuring the conditions and expectations in a manner most likely to correct behavior and by imposing community-based responses. **PENDING**
- E.** Ensure meaningful positive reinforcements exist to encourage compliance with the terms and conditions of release.
- F.** Consider privacy and confidentiality issues when sharing information.
- G.** Engage the community in the process of responding to parole violations.
- H.** Provide the victim with an opportunity to inform the imposition of graduated responses.